

P97000033322

LAZARUS CORPORATE INDUSTRIES, INC.
 Requestor's Name

890 S.W. 87 AVENUE, SUITE: 16
 Address

MIAMI, FLORIDA 33174 (305)552-5973
 City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

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 04/14/97--01044--024
 ****122.50 ****122.50
 Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. SUNSHINE REHABILITATION CENTER, INC.
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

FILED
 97 APR 14 AM 11:47
 TALLAHASSEE
 SECRETARY OF STATE

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED
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 DIVISION OF CORPORATION

K.R. APR 14 1997

Examiner's Initials	
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**ARTICLES OF INCORPORATION
OF
SUNSHINE REHABILITATION CENTER, INC.**

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TALLAHASSEE FLORIDA

The undersigned incorporators for the purpose of forming a corporation under the Florida General Corporation Act. hereby adopts the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: **SUNSHINE REHABILITATION CENTER, INC.**

The principal place of business of this corporation shall be:
782 N. LeJeune Rd. Suite 530, Miami, FL 33126

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

ARTICLE III CAPITAL STOCKS

The aggregate of shares of stocks and its par value that this corporation is authorized to have outstanding at any one time is: **100 SHARES WITH A PAR VALUE OF \$1.00 EACH.**

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street addresses of the initial officers and directors. If any, who shall hold office the first year of the corporation's existence or until their successors are elected are:

Olga Gonzalez

President, Treasurer

ARTICLES VI INCORPORATORS

The name and street address of the incorporators to these articles of incorporation are:

Olga Gonzalez
4235 S.W. 143 Ct.
Miami, FL 33175

President, Treasurer

IN WITNESS WHEREOF, the undersigned incorporators has have
executed these Articles of Incorporation this 8 day of
APRIL 1997.

Signatures of Incorporators

Olga Gonzalez

STATE OF FLORIDA

COUNTY OF DADE

THE FOREGOING instrument was acknowledged and sworn to
before me this 8 day of APRIL 1997 by

OLGA GONZALEZ of _____
(Name of Incorporator)

SUNSHINE REHABILITATION CENTER, INC
(Name of Corporation)



MARIA DEL CARMEN ORTEGA
COMMISSION # CC(22812
EXPIRES FEB 23, 2001
BONDED THROUGH
ATLANTIC BONDING CO., INC.

MCO Ortega
Notary Public
My Commission Expires: 2/23/01

**CERTIFICATE DESIGNATED
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Status, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: **SUNSHINE REHABILITATION CENTER, INC.**
2. The Name and address of the registered agent and office is:

**OLGA GONZALEZ
4235 S.W. 143 CT.
MIAMI, FL 33175**

Signature: *Olga Gonzalez*
(Corporate Officer)

Title: PRESIDENT

Date: APRIL 8, 1997

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE *Olga Gonzalez*
(Registered Agent)

Date: 4/8/97

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